

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

1445 Ross Avenue

Suite 1400

☐ Check if different than previously reported. (ACC)

Dallas

TX

75202-2703

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00119354

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

**4. TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 05 01 2016 through M M M / D D D / Y Y Y Y Y Y 05 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Todd Plott

Signature of Treasurer

Mr. Todd Plott

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y 06 06 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
05 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

|   | COLUMN A<br>This Period   | COLUMN B<br>Calendar Year-to-Date                                     |
|---|---|---|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br><span style="border: 1px solid black; padding: 2px;">2016</span> |   | <span style="border: 1px solid black; padding: 2px;">98102.48</span>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....   | <span style="border: 1px solid black; padding: 2px;">93899.12</span>  |   |
| (c) Total Receipts (from Line 19) .....   | <span style="border: 1px solid black; padding: 2px;">14846.95</span>  | <span style="border: 1px solid black; padding: 2px;">68771.46</span>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....   | <span style="border: 1px solid black; padding: 2px;">108746.07</span> | <span style="border: 1px solid black; padding: 2px;">166873.94</span> |
| 7. Total Disbursements (from Line 31) .....   | <span style="border: 1px solid black; padding: 2px;">3500.00</span>   | <span style="border: 1px solid black; padding: 2px;">61627.87</span>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | <span style="border: 1px solid black; padding: 2px;">105246.07</span> | <span style="border: 1px solid black; padding: 2px;">105246.07</span> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |   |

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 1 |   | 2 | 0 | 1 | 6 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 3 | 1 |   | 2 | 0 | 1 | 6 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other<br>Than Political Committees<br>(i) Itemized (use Schedule A).....             | 11925.88                      | 35262.18                          |
| (ii) Unitemized .....  | 2921.07                       | 33509.28                          |
| (iii) TOTAL (add<br>Lines 11(a)(i) and (ii))..... ►  | 14846.95                      | 68771.46                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees<br>(such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines<br>11(a)(iii), (b), and (c)) (Carry<br>Totals to Line 33, page 5) ..... ► | 14846.95                      | 68771.46                          |
| 12. Transfers From Affiliated/Other<br>Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....  | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures<br>(Refunds, Rebates, etc.)<br>(Carry Totals to Line 37, page 5).....  | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made<br>to Federal Candidates and Other<br>Political Committees.....            | 0.00                          | 0.00                              |
| 17. Other Federal Receipts<br>(Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account<br>(from Schedule H3) .....  | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d),<br>12, 13, 14, 15, 16, 17, and 18(c))..... ►                            | 14846.95                      | 68771.46                          |
| 20. Total Federal Receipts<br>(subtract Line 18(c) from Line 19) ..... ►                                     | 14846.95                      | 68771.46                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 0.00                          | 1200.87                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 1200.87                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 4000.00                       | 57000.00                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | -323.00                           |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | -323.00                           |
| 29. Other Disbursements .....  | -500.00                       | 3750.00                           |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 3500.00                       | 61627.87                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3500.00                       | 61627.87                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 14846.95                      | 68771.46                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | -323.00                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 14846.95                      | 69094.46                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 0.00                          | 1200.87                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 0.00                          | 1200.87                           |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. CLINT HAILEY**

Mailing Address 3724 COUNTRY CLUB CIRCLE

City State Zip Code  
Fort Worth TX 76109-1034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SVP, Chief Managed Care Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : A6007CF606C544DF4BDB**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CHRISTINE FREDRIC**

Mailing Address 1445 ROSS AVENUE

City State Zip Code  
DALLAS TX 75202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Reg/Market CBDO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : A5F509E4FA25E421E9D3**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. DENNIS MCGUFFIE**

Mailing Address 3504 CALECHE CT

City State Zip Code  
PLANO TX 75023-5820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Audit Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : AC8F84A7F45954B56BC2**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAROL BAILEY**

Mailing Address 20 BURTON HILLS BLVD

City  
NASHVILLE

State Zip Code  
TN 37215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Ops Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A18D84322874D466B951**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. ALVIN W JOSEPHS**

Mailing Address 3717 HERWOL AVE

City  
WACO

State Zip Code  
TX 76710-7218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Sr Director, Policy & Traning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AD4402AF1E46B404DADC**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. AUDREY T ANDREWS**

Mailing Address 702 PENFOLDS

City  
COPPELL

State Zip Code  
TX 75019-4544

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A4E2A443C2EDC4C6BAA2**

Amount of Each Receipt this Period

384.00

☐ Memo Item

Payroll Deduction: \$192.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

654.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RUBEN O RODRIGUEZ**

Mailing Address 6905 VILLA HERMOSA

 City  
 EL PASO

 State  
 TX

 Zip Code  
 79912-2341

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

PROVIDENCE EAST CAMPUS

Occupation

Director, Plant Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A5F169A370F0B406C811**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. MICHELE M FINNEY**

Mailing Address 10010 W. VILLA LINDO DR.

 City  
 PEORIA

 State  
 AZ

 Zip Code  
 85383-3486

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

TENET PRACTICE RESOURCES

Occupation

CEO, Market/Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A36AF0684580C41A28A8**

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. JEREMY CLARK**

 Mailing Address 111 S. PORT ROYAL DRIVE  
 Apt 19

 City  
 HILTON HEAD

 State  
 SC

 Zip Code  
 29928-2839

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

HILTON HEAD HOSPITAL

Occupation

MARKET CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AA322F6D7AB7042148EE**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

234.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. TERRY WHEELER**

Mailing Address 13802 MAGNOLIA MANOR

City  
CYPRESSState  
TXZip Code  
77429-8162FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cypress Fairbanks Med Center

Occupation

CEO

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : A02A54AEC22314DA2BA0

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. TERESA L HUSKEY**

Mailing Address 4333 PERSHING AVE

City  
FORT WORTHState  
TXZip Code  
76107-4243FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

Sr Director, Government Relations

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : AA69245894C774ACBB61

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. DANIEL M KARNUTA**

Mailing Address 981 PATRICIAN COURT

City  
FARVIEWState  
TXZip Code  
75069-8781FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

SVP, CFO

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : AFCB6DD89E62445D4A87

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

332.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. DAWN CASTRO**

Mailing Address 15408 FOX MEADOW LANE

City State Zip Code  
FRISCO TX 75035-3671

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tenet Patient Financial Services

Occupation  
VP, CLIENT DELIVERY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AEA068B00E6DC465C9E8**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. STEPHEN M MOONEY**

Mailing Address 11549 CROMWELL CIRCLE

City State Zip Code  
DALLAS TX 75229-7503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tenet Patient Financial Services

Occupation  
PRESIDENT, CONIFER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

05 / 14 / 2016

**Transaction ID : A2943EFF0F00247B2866**

Amount of Each Receipt this Period

39.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. MARY CLEARY**

Mailing Address 940 BONNIE BRAE PLACE

City State Zip Code  
RIVER FOREST IL 60305-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MacNeal Hospital

Occupation  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A665C5503759842A5BE2**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

195.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DOUGLAS BREWER**

Mailing Address 641 NORTH AVE N.E. #1407

City  
ATLANTA

State Zip Code  
GA 30308-9582

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BROOKWOOD MEDICAL CENTER

Occupation  
ASSOCIATE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

Transaction ID : AAAB062A31D6D4FA6B47

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. TIMOTHY PUTHOFF**

Mailing Address 3910 BODEN LANE  
Suite 1400

City  
SPRING

State Zip Code  
TX 77386-2703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOUSTON NORTHWEST MEDICAL

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

Transaction ID : A7629044219E74667BFE

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. DAVID L ARCHER**

Mailing Address 2594 HOCKSETT COVE

City  
GERMANTOWN

State Zip Code  
TN 38139-6655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Francis Hospital

Occupation  
MARKET CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

05 / 28 / 2016

Transaction ID : A190F81ED1BA94D918A9

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

348.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. PAMELA DAVIS**

Mailing Address 5760 DANIEL RD

City State Zip Code  
PLANO TX 75024-5914

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

Sr Director, AR Management Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2016

Transaction ID : A48CC53FCEAE14B8D93D

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. JAMES BRASHEAR**

Mailing Address 3560 DALLAS PARKWAY

City State Zip Code  
FRISCO TX 75034

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

SVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2016

Transaction ID : AAEC1A6D0F0254252ABA

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. WESLEY CHICK**Mailing Address 6401 FITZGERALD DR.  
#1400

City State Zip Code  
PLANO TX 75074-2703

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Sr Director, Managed Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2016

Transaction ID : AE4F909BE9F514205A98

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

462.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 13 OF 45

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. GARY K RUFF**

Mailing Address 1724 BYRON NELSON PKWY

City State Zip Code  
 SOUTHLAKE TX 76092-8868

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SVP, Physician Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : A58FB3D5BC3EF43AB9B6

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. ELIZABETH JOHNSON**

Mailing Address 3302 MARSH LANE

City State Zip Code  
 GRAPEVINE TX 76051-6828

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, APPLIED CLINICAL INF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : AE4A228D8D680472BAC1

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. HAROLD BANDY**

Mailing Address 9004 OLD SMYRNA ROAD

City State Zip Code  
 BRENTWOOD TN 37027-6058

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Sr Director, IS Architecture

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : A9A6AFA89ED1A4E0C830

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

460.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COREY L DAVISON**

Mailing Address 1224 BLAIRWOOD DR

City

FLOWER MOUND

State

TX

Zip Code

75028-3617

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 28 / 2016

Transaction ID : AEDAAF445636A4E288EF

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. JASON PINKALL**

Mailing Address 6526 ANITA ST

City

DALLAS

State

TX

Zip Code

75214-2706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

Transaction ID : AE32AC58FF6F2401486E

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. JOHN TURNER Jr.**

Mailing Address 708 LAND FALL DRIVE

City

Rock Hill

State

SC

Zip Code

29732-9437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Sr Director, Practice Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

Transaction ID : AAE9FEF725B134554A6C

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

348.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. MARK MONTONEY**

Mailing Address 5541 HAWKS LANDING DRIVE

City State Zip Code  
 ARRINGTON TN 37014-7499

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AC56902A1D1B741FEB43**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. CRAIG C ARMIN**

Mailing Address 23510 BERDON STREET

City State Zip Code  
 WOODLAND HILLS CA 91367-3004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, GOVT PROGRAMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A88F27EC5AFBB4FE4A95**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. RICKY JOHNSTON**

Mailing Address 401 N.CHURCH ST

City State Zip Code  
 MCKINNEY TX 75069-3854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Ops And Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AF06AC17F1B634739A3C**

Amount of Each Receipt this Period

90.00

☐ Memo Item

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

362.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. WEBB COCHRAN**

Mailing Address 3961 ST. CLAIRE CT

City State Zip Code  
 ATLANTA GA 30319

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Director, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : ABF3B1C0DE59F4F26B6A

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. TIM ADAMS**

Mailing Address 808 PYRENEES DRIVE

City State Zip Code  
 SOUTHLAKE TX 76092-2052

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SVP, Ops Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : AE5EF30DAAE5E47C5A83

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. DINA L DUNN**

Mailing Address 3717 CHERRY RIDGE DR

City State Zip Code  
 FRISCO TX 75033-1328

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, HR Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : AEFB82B75CB034F65B79

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

320.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

### A. MARK ROBERTS

Mailing Address 13047 W ESTERO LN

City State Zip Code  
LITCHFIELD PAR AZ 85340-5576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SR SPEC, INPAT/CASE MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2016

Transaction ID : A57109AD086514E629FB

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

### B. DANIEL WALDMANN

Mailing Address 1111 N. MONTCLAIR AVE

City State Zip Code  
DALLAS TX 75208-3520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SVP, Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2016

Transaction ID : A15B08417BBA44408879

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

### C. DAVID W BORDOFSKE

Mailing Address 5001 ASHLAND BELLE LANE

City State Zip Code  
FRISCO TX 75035-7682

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Patient Mgmt System

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2016

Transaction ID : A5E0916B039FC4245987

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JASON E EVANS**

Mailing Address 3409 VILLANOVA STREET

City State Zip Code  
DALLAS TX 75225-6018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

CEO, Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A32435F9CD7E84FAF91D**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. RICHARD E GLANCEY**

Mailing Address 4418 SAINT ANDREWS BLVD

City State Zip Code  
IRVING TX 75038-1709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Director, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A6E288FC0A34B4AAB988**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. KENNETH F SUTHERLAND**

Mailing Address 1809 ST. PHILIP AVENUE

City State Zip Code  
SOUTHLAKE TX 76092-8492

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Construction & Design

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AD01DA64701D94AFBBC2**

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

232.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 45  
(check only one)

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JEFFREY KOURY**

Mailing Address 712 1/2 NARCISSUS AVE

|                |       |            |
|----------------|-------|------------|
| City           | State | Zip Code   |
| CORONA DEL MAR | CA    | 92625-4210 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

CEO, Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AED21DC3CA9D44E3DAC:**

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. FRANK MOLINARO**Mailing Address 6783 W GREENBRIAR DRIVE  
Suite 1400

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| GLENDALE | AZ    | 85308-2703 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ABRAZO ARROWHEAD CAMPUS

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AB1D26034F964418A91F**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. DOUGLAS E RABE**

Mailing Address 7746 EAGLE TRAIL

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| DALLAS | TX    | 75238-4115 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A969A744BDAFC42ADB2B**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

232.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GARY L HONTS, JR.**

Mailing Address 78795 SAINT THOMAS DRIVE

City State Zip Code  
 BERMUDA DUNES CA 92203-1723

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 John F Kennedy Memorial Hospital

Occupation  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

05 / 28 / 2016

Transaction ID : A6E3F60F137374F8B9D4

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. KATHLEEN TREGEAR**

Mailing Address 3914 DEEP RIVER  
 #1400

City State Zip Code  
 SAN ANTONIO TX 78253-2703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Mission Trail Baptist Hospital

Occupation  
 CNO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

Transaction ID : A6122F98AB6794760B7B

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. KELVIN A BAGGETT**

Mailing Address 6453 TULIP LANE

City State Zip Code  
 Dallas TX 75230-4148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation  
 SVP, CLINICAL OPS & CCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

05 / 14 / 2016

Transaction ID : A3313F7146C4A4D6EA44

Amount of Each Receipt this Period

-39.00

☐ Memo Item

Payroll Deduction: \$-39.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. TREVOR FETTER**

Mailing Address 3806 BEVERLY DRIVE

City State Zip Code  
DALLAS TX 75205-2807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

CEO & President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3663.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AD46F34C14A57426C94C**

Amount of Each Receipt this Period

666.00

☐ Memo Item

Payroll Deduction: \$333.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. KEITH PITTS**

Mailing Address 4441 S. VERSAILLES AVE

City State Zip Code  
Dallas TX 75205-3012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AB6326D890CD44663AC8**

Amount of Each Receipt this Period

384.00

☐ Memo Item

Payroll Deduction: \$192.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. SALLY A HURT-DEITCH**

Mailing Address 712 WALTHAM CT

City State Zip Code  
EL PASO TX 79922-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Providence Memorial Campus

Occupation

CEO, Market/Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AFC054ADFBA8C4CBCA59**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: \$50.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. LUANNE EWALD**

Mailing Address 232 MIDLAND BLVD

City  
ROYAL OAK

State Zip Code  
MI 48073-2670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DMC-Children's Hospital of Michigan

Occupation  
DBD-ASSOC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

05 / 28 / 2016

Transaction ID : AD412054B68FE487DA68

Amount of Each Receipt this Period

76.94

☐ Memo Item

Payroll Deduction: \$38.47/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. PATRICK MALONEY**

Mailing Address 581 S ARLINGTON AVENUE

City  
ELMHURST

State Zip Code  
IL 60126-4040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West Suburban Medical Center

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

Transaction ID : ABB33E98C7CA64E38A0A

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. MARK P LISA**

Mailing Address 179 NIBLICK ROAD #129

City  
PASO ROBLES

State Zip Code  
CA 93446-2120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TWIN CITIES COMMUNITY HOSPITAL

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

05 / 28 / 2016

Transaction ID : A9EE191C7B90149568AA

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

232.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
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| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CONRAD MALLET**

Mailing Address 19386 CUMBERLAND WAY

City  
DETROITState  
MIZip Code  
48203-1456FEC ID number of contributing  
federal political committee.

C

Name of Employer

DMC-Harper University Hospital

Occupation

CAO - Detroit Market

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 28  | / | 2016    |

Transaction ID : AEC674E5405B64BAA9DF

Amount of Each Receipt this Period

76.94

☐ Memo Item

Payroll Deduction: \$38.47/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. VICTOR JORDAN**

Mailing Address 314 VAILWOOD COURT

City

Bloomfield Hills

State

MI

Zip Code

48302-1573

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DMC-Harper University Hospital

Occupation

CFO, REGION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 28  | / | 2016    |

Transaction ID : AB25E3E6EB3B940F78E2

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. JOSEPH MULLANY**

Mailing Address 2169 TOTTENHAM ROAD

City

BLOOMFIELD HIL

State

MI

Zip Code

48301-2332

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DMC-Harper University Hospital

Occupation

CEO, Market

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 28  | / | 2016    |

Transaction ID : ADAC71368F163432DB37

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

346.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EDWARD MESCO**

Mailing Address 7365 NW 54TH STREET

City

LAUDERHILL

State

FL

Zip Code

33319-6346

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Tenet Florida Service Center

Occupation

Director, Reg Reimbursement

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A46535B7038F24B0B910**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. JOHN A GRAH**

Mailing Address 7933 CORNELL AVE

City

ST LOUIS

State

MO

Zip Code

63130-1842

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

LAKEWOOD REGIONAL MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

429.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A30A405AEF5234349A9F**

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. MANUEL LINARES**

 Mailing Address 6801 SW 75TH AVE  
 Apt 901

City

MIAMI

State

FL

Zip Code

33143-3693

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

NORTH SHORE MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

418.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AF824C3D53A014360AF2**

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

204.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KENT G CLAYTON**

Mailing Address 125 BRANCH

City

IRVINE

State

CA

Zip Code

92618-4266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOS ALAMITOS MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

418.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A191C6CCB65DB4D5AB6/**

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. THOMAS I RUNKLE**

Mailing Address 868B PENNOCK ST

City

PHILADELPHIA

State

PA

Zip Code

19130-1234

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAHNEMANN HOSPITAL

Occupation

ASSOCIATE ADMINISTRATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 21 / 2016

**Transaction ID : AFE18F4DAE9734130B59**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. PATRICIA LECROY**

Mailing Address 1220 VALLEY DRIVE

City

ATTALLA

State

AL

Zip Code

35954-8576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

REG CHIEF NURSING EXEC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 25 / 2016

**Transaction ID : A8EE5F4B7E83F4485B58**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

614.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. William Restum**

Mailing Address 20300 Pollyanna

City

Livonia

State

MI

Zip Code

48152-1273

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DMC REHABILITATION INSTITUTE OF MI

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 25 / 2016

**Transaction ID : ADC5E99ECD9E0428788E**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBBIE HINDMAN**

Mailing Address 3400 HIGHWAY 78

City

JASPER

State

AL

Zip Code

35501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAPTIST HEALTH SYSTEM

Occupation

CNO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 25 / 2016

**Transaction ID : AC85A7DDDA9274756951**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THALIA MARTIN**

Mailing Address 3802 SACO WAY

Suite 1400

City

EL PASO

State

TX

Zip Code

79928-2703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROVIDENCE EAST CAMPUS

Occupation

Network Director, CQI Market

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A2FA3AF785478477EB7B**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

788.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHELE SZKOLNICKI**

Mailing Address 308 FOULKE LANE

City  
SPRINGFIELDState  
PAZip Code  
19064-1109FEC ID number of contributing  
federal political committee.

C

Name of Employer

TENET PRACTICE RESOURCES

Occupation

Market Ops Director, Prac Oper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 28  |   | 2016    |

**Transaction ID : A5EBA20C5D7EB4B9A991**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. STAN HOLM**Mailing Address 20996 W. CORA VISTA  
Suite 1400City  
BUCKEYEState  
AZZip Code  
85396-2703FEC ID number of contributing  
federal political committee.

C

Name of Employer

ABRAZO WEST CAMPUS

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 28  |   | 2016    |

**Transaction ID : AF007DE7C23B347849B8**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. SCOTT MOREY**Mailing Address 4634 NORTH 36TH STREET  
Suite 1400City  
PHOENIXState  
AZZip Code  
85018-2703FEC ID number of contributing  
federal political committee.

C

Name of Employer

ABRAZO WEST CAMPUS

Occupation

CNO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 28  |   | 2016    |

**Transaction ID : A5337F6B557B3463FAAE**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

### A. MONICA C VARGAS

Mailing Address 4017 FLAMINGO

City  
EL PASO

State  
TX

Zip Code  
79902-1313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROVIDENCE SIERRA CAMPUS

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

Transaction ID : A4088F51C95304EDA835

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

### B. BENSON P CHACKO

Mailing Address 6308 LA POSTA

City  
EL PASO

State  
TX

Zip Code  
79912-3040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROVIDENCE SIERRA CAMPUS

Occupation

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

Transaction ID : AEB9A3674554B40C1866

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

### C. DEBORAH DALEY

Mailing Address PO Box 757

City  
Edgewood

State  
TX

Zip Code  
75117-0757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

ASST - ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 28 / 2016

Transaction ID : A4C50A1FD8B614F0988B

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RICHARD D CARTER**

Mailing Address 5166 LAKE CREST CR

City

BIRMINGHAM

State

AL

Zip Code

35226-3543

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAPTIST HEALTH SYSTEM

Occupation

CFO, Market/Sys

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 28    |   | 2016        |

**Transaction ID : A66FB54877047406DABB**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. JOHN KNOX**

Mailing Address 8327 WINE CUP HILL

City

SAN ANTONIO

State

TX

Zip Code

78256-2498

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAPTIST HEALTH SYSTEM

Occupation

CEO-Chief Admin Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 28    |   | 2016        |

**Transaction ID : A48722E874AC8458AB19**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. STEPHEN M MOONEY**

Mailing Address 11549 CROMWELL CIRCLE

City

DALLAS

State

TX

Zip Code

75229-7503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

PRESIDENT, CONIFER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

486.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 28    |   | 2016        |

**Transaction ID : A34DCAE5495D8450291B**

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶

172.00

**TOTAL** This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOSEPH STEINER**

Mailing Address 11226 POINTE COURT

City

SAINT LOUIS

State

MO

Zip Code

63127-1741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MacNeal Hospital

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A216E7D8D17ED432FB9D**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. NORMA A ZERINGUE**

Mailing Address 5757 SOUTHWESTERN BLVD

City

DALLAS

State

TX

Zip Code

75209-3437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

SVP, STRATEGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AC6B3ADF359F14DEEA38**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. LISA SMITH**

Mailing Address 8524 MAJESTIC OAK COURT

City

MONTGOMERY

State

TX

Zip Code

77316-7657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

Director, Mecs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A6394AEC68E4C4B9A9DA**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 11a   ☐ 11b   ☐ 11c   ☐ 12  
☐ 13   ☐ 14   ☐ 15   ☐ 16   ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MATTHEW C MICHAELS**

Mailing Address 3507 MUNSTEAD TRAIL

City

FRISCO

State

TX

Zip Code

75034-1166

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

SVP, President, Revenue Cycle Manageme

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2016
**Transaction ID : A627534DB5BE54AB3B42**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. JANIE PATTERSON**

Mailing Address 5572 SOUTHERN HILLS DR

City

FRISCO

State

TX

Zip Code

75034-1566

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Patient Financial Services

Occupation

SVP, Revenue Cycle Management

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2016
**Transaction ID : A691761849A454538B7D**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. MARGARET PERREIRA**

Mailing Address 2972 HARROW ROAD

City

SPRING HILL

State

FL

Zip Code

34608-4429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SR SPEC, INPAT/CASE MGMT

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2016
**Transaction ID : AE7A1D572C41D4642ABB**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 45  
(check only one)

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EDLECIA SHERROD**

Mailing Address 1955 MARKET CTR BD #2418

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| DALLAS | TX    | 75207-3480 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Manager, Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AE473255307BF467B962**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. RUSTY MCNEW**

Mailing Address 3141 LOVERS LANE

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| DALLAS | TX    | 75225-7720 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

REG CHIEF NURSING EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.33

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A500FF7C11F014A12A86**

Amount of Each Receipt this Period

38.06

☐ Memo Item

Payroll Deduction: \$19.03/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. ALAN R CASON**Mailing Address 2053 MOSSBERG DR.  
Apt 1503

|       |       |            |
|-------|-------|------------|
| City  | State | Zip Code   |
| PLANO | TX    | 75023-5691 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, UCC &amp; Satellite Eds

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A209A125B9A984C3C8E9**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.06



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PAUL A CASTANON**

Mailing Address 6307 PRESTON PKWY

City  
DALLAS

State  
TX

Zip Code  
75205-1650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Deputy General Counsel & Corp Sec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A574ED681B9C746D4BA6**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. SHELLEY GILES**

Mailing Address 3803 STOCKTON LN

City  
DALLAS

State  
TX

Zip Code  
75287-4919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Director, Relocation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : ABE3E49A2201E4F19ACA**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. DAVID SASSANO**

Mailing Address 10847 LOCHSPRING DRIVE

City  
DALLAS

State  
TX

Zip Code  
75218-1201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Director, Reg Phy Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A61E8EFA3C38E4EC5A0D**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL S HONGOLA**

Mailing Address 6704 WESTMONT DRIVE

City  
COLLEYVILLE

State Zip Code  
TX 76034-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Erp Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AE9CD944601294794A1A**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. LORI HOLMAN**

Mailing Address 7213 ELLIS ROAD

City  
FORT WORTH

State Zip Code  
TX 76112-4301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Manager, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A7BA29996EBC84CB886C**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. MARITA COVARRUBIAS**

Mailing Address 7115 WILDGROVE AVE

City  
DALLAS

State Zip Code  
TX 75214-3841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, ASST GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A65FC131D871247A3AC7**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

**A. PAUL SLAVIN**

Mailing Address 10912 CORTEZ CT.

City State Zip Code  
 FRISCO TX 75033-5345

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, COMP BENF &amp; CORP HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : A6875173A7E1B47E3A1A

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. ANDREAS M GRAF**

Mailing Address 3975 STOCKTON LANE

City State Zip Code  
 DALLAS TX 75287-4921

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Manager, Travel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : ADF1ADF27E634489FAD7

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. BARRY LEFFLER**

Mailing Address 4123 WYCLIFF AVE

City State Zip Code  
 DALLAS TX 75219-3005

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2016

Transaction ID : ABBD530506DE84B3EB06

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL J BIERMAN, JR.**

Mailing Address 18 CENTER CT

City  
HEATHState  
TXZip Code  
75032-5999FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, OPS FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 8 |   | 2 | 0 | 1 | 6 |

**Transaction ID : ABFB84C055F0A4167BEE**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. MICHAEL MALONEY**Mailing Address 4514 WILDWOOD RD  
Suite 1400City  
DALLASState  
TXZip Code  
75209-2703FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

SVP, Acquisitions &amp; Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 8 |   | 2 | 0 | 1 | 6 |

**Transaction ID : AD9FB6B4E34E94DFAAEE**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. MICHAEL HALTER**

Mailing Address 141 RODNEY CIRCLE

City  
BRYN MAWRState  
PAZip Code  
19010-1312FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAHNEMANN HOSPITAL

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 8 |   | 2 | 0 | 1 | 6 |

**Transaction ID : AB2B5297157BB4748945**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DAVID KATZIN**

Mailing Address 3080 CANTERBERRY DRIVE

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| BOCA RATON | FL    | 33434    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Florida Service Center

Occupation

Reg/Market CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A6E2E9E73BC274ADE843**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. KEITH STANHILL**

Mailing Address 2819 WEDGEWOOD DRIVE

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| PASO ROBLES | CA    | 93446-5436 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TWIN CITIES COMMUNITY HOSPITAL

Occupation

CHIEF HR OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AEE412D8CE415403BA68**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. JASON P ALEXANDER**

Mailing Address 22 ISLE OF HOPE RD

|                |       |            |
|----------------|-------|------------|
| City           | State | Zip Code   |
| MOUNT PLEASANT | SC    | 29464-5500 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

East Cooper Community Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A877FAB2243074973BB5**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 38 OF 45

|   |                              |                              |                             |                             |                             |                             |                             |                             |
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|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL J KING**

Mailing Address 2713 STUYVESANT CR

 City  
 MODESTO

 State  
 CA

 Zip Code  
 95356-0337

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 GRIFFIN-SPALDING HOSPITAL

 Occupation  
 CFO (POOL)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 8 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : AD4F6B6B17E104591A41**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. REGINALD EADIE**

Mailing Address 246 KEELSON DRIVE

 City  
 DETROIT

 State  
 MI

 Zip Code  
 48215-1283

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 DMC-Harper University Hospital

 Occupation  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 8 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : AAAD4B3EE0BB8444F998**

Amount of Each Receipt this Period

38.48

☐ Memo Item

Payroll Deduction: \$19.24/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. TIMOTHY MENTON**

Mailing Address 3700 East South Street

 City  
 Lakewood

 State  
 CA

 Zip Code  
 90712-1419

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 LAKEWOOD REGIONAL MEDICAL CENTER

 Occupation  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 8 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : A88A274BE3009438DB0F**

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

172.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARIO ESTRELLA**

Mailing Address 4920 NE STALLINGS DRIVE

City State Zip Code  
 NACOGDOCHES TX 75965-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NACOGDOCHES MEDICAL CENTER

Occupation  
 CNO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

Transaction ID : ACF31B51ECD9D429E9DF

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. CEZAR L QUIAMBAO**

Mailing Address 845 BRISA DEL MAR

City State Zip Code  
 EL PASO TX 79912-1513

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Providence Memorial Campus

Occupation  
 Director, Respiratory Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

Transaction ID : AABC7797CAEF94B5CB99

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. MARK H BRYAN**

Mailing Address 17318 PAVAROSO ST

City State Zip Code  
 BOCA RATON FL 33496-2581

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 DELRAY COMMUNITY HOSPITAL

Occupation  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

Transaction ID : AAA3FCD1A34B04E2CBCF

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 45

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ENRIQUE MARTINEZ**Mailing Address 1212 CALLE LAGO  
Suite 1400

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| EL PASO | TX    | 79912-2703 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Providence Memorial Campus

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AA2A20ADE836740D18BA**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. KAREN R FOWLER**

Mailing Address 8306 TURQUOISE

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| EL PASO | TX    | 79904-2513 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Providence Memorial Campus

Occupation

CNO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A1323718D04DB4D0B885**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. TYLER MURPHY**

Mailing Address 108 LONDBERRY TERR.

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| SOUTHLAKE | TX    | 76092-7321 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP &amp; Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A0259EF339DE2467AA09**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TARA JONES**

Mailing Address 24 SURREY LANE

City  
NATICK

State  
MA

Zip Code  
01760-5200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Client Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A933672C0588D4951937**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. LEONARD DEONARINE**

Mailing Address 1129 WISHING WELL CT

City  
CEDAR HILL

State  
TX

Zip Code  
75104-8255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

Director, Business Continuity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : A7A4631EE94DD423F8DD**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. JEREMY D FALKE**

Mailing Address 1701 NATURAL BRIDGE DR

City  
FRISCO

State  
TX

Zip Code  
75034-1229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tenet Healthcare

Occupation

VP, Talent, Cult&Perf Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 28 / 2016

**Transaction ID : AA2A0892EE00B4B6CA0C**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                             |
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| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GARY J SLOAN**

Mailing Address 615 STEVENS CT

City

DANVILLE

State

CA

Zip Code

94506-4805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Ramon Regional Medical Center

Occupation

CEO

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 8 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : A9752CA5F09CE45358CB**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. MARK BENZ**

Mailing Address 1754 FORGE MOUNTAIN DR

City

VALLEY FORGE

State

PA

Zip Code

19460-4630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARONDELET ST JOSEPHS

Occupation

CEO

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 8 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : AC40A6F0EC7BC4094A58**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. ANTHONY TEDESCHI**

Mailing Address 115 CHRISTINA CIRCLE

City

WHEATON

State

IL

Zip Code

60189-3115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Weiss Memorial Hospital

Occupation

CEO, Market/Sys

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 8 |   |   | 2 | 0 | 1 | 6 |   |   |

**Transaction ID : A00DE6C8308AB4DEA89D**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

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|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KENNETH E JORDAN**

Mailing Address 17331 ALMELO LANE

|                |       |            |
|----------------|-------|------------|
| City           | State | Zip Code   |
| HUNTINGTON BEA | CA    | 92649-9046 |

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 FOUNTAIN VALLEY REGIONAL HOSPITAL

 Occupation  
 CFO

Receipt For:

|  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                  |

Aggregate Year-to-Date ▼

209.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AF0A4A999156444B28DF**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. BARBARA EUSEBIO**

Mailing Address 82-814 PEMBROKE LANE

|       |       |            |
|-------|-------|------------|
| City  | State | Zip Code   |
| INDIO | CA    | 92201-9692 |

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 John F Kennedy Memorial Hospital

 Occupation  
 CNO

Receipt For:

|  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                  |

Aggregate Year-to-Date ▼

228.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : A4970B6ED7A574E5A91C**

Amount of Each Receipt this Period

57.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. DAVID KATZ**

Mailing Address 363 ST. CLAIR

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| GROSSE POINTE | MI    | 48230-1501 |

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

Tenet Healthcare

 Occupation  
 Director, Government Relations

Receipt For:

|  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                  |

Aggregate Year-to-Date ▼

211.53

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 28    | / | 2016        |

**Transaction ID : AEE2D4FC7C89A4BE08C1**

Amount of Each Receipt this Period

38.46

☐ Memo Item

Payroll Deduction: \$19.23/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

133.46

**TOTAL** This Period (last page this line number only)..... ►

11925.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 45

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LOIS FRANKEL FOR CONGRESS**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 24    |   | 2016        |

Mailing Address PO BOX 812421

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Boca Raton | FL    | 33481-2421 |

Purpose of Disbursement  
Political Contribution - Primary 2016

Candidate Name

**Lois J Frankel**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 22

Category/  
Type**Transaction ID : B7C942F6F7FD74F56AC8**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALDEN FOR CONGRESS**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2016        |

Mailing Address PO BOX 1091

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| HOOD RIVER | OR    | 97031    |

Purpose of Disbursement  
Political Contribution

Candidate Name

**Gregory P Walden**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 02

Category/  
Type**Transaction ID : BAA6868FB22B54CEA9CE**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AX PAC**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 18    |   | 2016        |

Mailing Address PO BOX 538

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| WAUSAU | WI    | 54402    |

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Other

Category/  
Type**Transaction ID : B9BBBFC5C38CD455F81F**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 4000.00 |
|---------|

|         |
|---------|
| 4000.00 |
|---------|

|  |     |  |     |  |     |  |     |  |      |  |     |
|--|-----|--|-----|--|-----|--|-----|--|------|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25   |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | X 29 |  | 30b |

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

-500.00

 Memo Item

Memo Item

A diagram of a rectangular frame with four vertical supports. The frame is represented by a rectangle with a thick border. Inside the rectangle, there are four vertical lines, one in each quadrant, representing supports or columns. The top and bottom horizontal lines are thicker than the side vertical lines.

[illegible]

 Memo Item

-500.00

-500.00